

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-475)

Serial No.  
Applicant(s)  
Filing Date

CLAIMS

	AS FILED		AFTER AMENDMENT		AFTER AMENDMENT			AS FILED		AFTER AMENDMENT		AFTER AMENDMENT		
	IND.		DEP.		IND.			IND.		DEP.		IND.		
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